

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 04/2018)				TRANSCRIPT ORDER Please use one form per court reporter. <i>CJA counsel please use Form CJA24</i> Please read instructions on next page.					COURT USE ONLY DUE DATE:						
1a. CONTACT PERSON FOR THIS ORDER Andrew Wilhelm				2a. CONTACT PHONE NUMBER (202) 887-3556			3a. CONTACT EMAIL ADDRESS awilhelm@gibsondunn.com								
1b. ATTORNEY NAME (if different) Joshua Lipshutz				2b. ATTORNEY PHONE NUMBER (202) 955-8500			3b. ATTORNEY EMAIL ADDRESS jlipshutz@gibsondunn.com								
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) Gibson, Dunn & Crutcher LLP 1050 Connecticut Ave. NW Washington, DC 20036				5. CASE NAME In re Facebook, Inc. Consumer Privacy User Profile L					6. CASE NUMBER 3:18-md-02843						
				8. THIS TRANSCRIPT ORDER IS FOR: <input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached) <input checked="" type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL CJA: <u>Do not use this form: use Form CJA24.</u>											
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ <input checked="" type="checkbox"/> FTR															
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:															
a. HEARING(S) (OR PORTIONS OF HEARINGS)				b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)					c. DELIVERY TYPE (Choose one per line)						
DATE	JUDGE (initials)	TYPE (e.g. CMC)	PORTION If requesting less than full hearing, specify portion (e.g. witness or time)	PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	ECF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	3-DAY	DAILY (Next day)	HOURLY (2 hrs)	REALTIME
07/31/2018	VC	CMC	All	●	○	○	●	○	○	○	○	○	○	●	○
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10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:															
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).														12. DATE	
11. SIGNATURE /s/ Joshua Lipshutz														08/01/2018	

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